10-720 116

										Application or Docket Number			
_	PATENT	PP				۸ ۸							
Effective October 1, 2003 9729 16.													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	WITHY	OR	OTHER		
T	OTAL CLAIMS		21		•		ŀſ	RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00	
×	OTAL CHARGE	ABLE CLAIMS	U minus 20≈		• (XS 9=		OR	X\$18=	18	
INI	DEPENDENT C	LAIMS		= E euni	· 9`			X43=		OR	X86=		
M	JUTIPLE DEPE	NDENT CLAIM P	RESENT			. 🗆		+145 =		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							Ł	TOTAL	-	OR	TOTAL		
CLAIMS AS AMENDED - PART II]	OTHER	THAN	
		(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENTA	480	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
WQ.	Total	. 23	Minus	- 2	1	. 2		X\$ 9=		OR	xsag2	100	
ME	Independent	. 4	Minus	***	3	- /		X43=		OR	X8€0	200	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ן ו	+145=		OR	+290≈		
	721				•	•	L	TOTAL	 		YOYAL	300	
11	301	(Cohema 4)		(Calum	O	(Calumn 3)	A	DOM. FEE	<u> </u>	,	ADDIT, FEE		
		(Column 1) CLAMS		(Colum	ST	(Column 3)	1 _		ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA	lL	RATE ·	TIONAL		RATE	TIONAL	
	Total	• 26	Minus	- 23		- 3 ·	ŀſ	X\$ 9=		OR	X\$18=	150,00	
	Independent	• 5	Minus	••• 4		-0		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	LIPLE DEF	ENDEN	DENI CLAIM			+145=		OR	+290=		
							L	YOTAL		DB	TOTAL	150.00	
7/3/07 (Column 1) (Column 2) (Column 3)											, <u> </u>		
	11:11	CLAMS		HIGHE	SY				ADDI-	f		ADD1-	
	7/2/07	REMAINING AFTER AMENDMENT		PREVIOI PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	26	Minus	- 2		• Ø		X\$ 9=		OR	X\$18-	\ /	
	Independent	• 57	Minus	•• \$		= Ø		X43=		OR	XB6=	∇	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM.					ا ```		$\overline{}$	
• If the entry in column 1 is less than the entry in column 2, write "O' in column 3.													
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL OR ADDIT. FEE ORD THIS SPACE is less than 3, enter "3." ADDIT. FEE OR ADDIT. FEE													
1	he Highest Num	ber Previously Paid	For (Total or	Independer	i) b the	highest number	found	in the app	ropriate box	in colu	ıma 1.	l	